Fill in this infor	mation to identify you	r case:			
Debtor 1	Robin Valerie Co	owan			
Dalatan O	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	r of ohio		
Case number	19-14483				
(if known)	10 14400			_	if this is an
				ameno	ded filing
	orm 106Sum				
			nd Certain Statistical Informati		2/15
nformation. Fill	out all of your schedu	les first; then complete t	e are filing together, both are equally respons he information on this form. If you are filing a		
our original for	ms, you must fill out a	new Summary and chec	k the box at the top of this page.		
Part 1: Summ	narize Your Assets				
				Your as	
					ssets f what you own
1. Schedule A	A/B: Property (Official F	Form 106A/B)		Value o	
1a. Copy lir	ne 55, Total real estate,	from Schedule A/B		Value o	f what you own 30,900.00
1a. Copy lir	ne 55, Total real estate,	from Schedule A/B		Value o	f what you own 30,900.00
1a. Copy lir 1b. Copy lir	ne 55, Total real estate, ne 62, Total personal pr	from Schedule A/Boperty, from Schedule A/B.		\text{Value o} \\ \\$ \\ \\$	f what you own
1a. Copy lir 1b. Copy lir 1c. Copy lir	ne 55, Total real estate, ne 62, Total personal pr	from Schedule A/Boperty, from Schedule A/B.		\text{Value o} \\ \\$ \\ \\$	f what you own 30,900.00 9,052.00
1a. Copy lir 1b. Copy lir 1c. Copy lir	ne 55, Total real estate, ne 62, Total personal prone 63, Total of all proper	from Schedule A/Boperty, from Schedule A/B.		\text{Value o} \\$ \\$	30,900.00 9,052.00
1a. Copy lir 1b. Copy lir 1c. Copy lir	ne 55, Total real estate, ne 62, Total personal prone 63, Total of all proper	from Schedule A/Boperty, from Schedule A/B.		Value of state of the control	f what you own 30,900.00 9,052.00 39,952.00
1a. Copy lir 1b. Copy lir 1c. Copy lir Part 2: Summ 2. Schedule D	ne 55, Total real estate, ne 62, Total personal prone 63, Total of all proper narize Your Liabilities 2: Creditors Who Have 6	from Schedule A/Boperty, from Schedule A/B. ty on Schedule A/B	γ (Official Form 106D)	\$	30,900.00 9,052.00 39,952.00 abilities you owe
1a. Copy lir 1b. Copy lir 1c. Copy lir Part 2: Summ 2. Schedule D 2a. Copy th	ne 55, Total real estate, ne 62, Total personal prone 63, Total of all proper narize Your Liabilities D: Creditors Who Have 0 te total you listed in Column	from Schedule A/Boperty, from Schedule A/B. ty on Schedule A/B Claims Secured by Property Jumn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedul</i> e	\$	30,900.00 9,052.00 39,952.00 abilities you owe
1a. Copy lir 1b. Copy lir 1c. Copy lir 1c. Summ 2. Schedule D 2a. Copy th 3. Schedule E	ne 55, Total real estate, ne 62, Total personal prone 63, Total of all proper narize Your Liabilities O: Creditors Who Have 0 te total you listed in Column E/F: Creditors Who Have	from Schedule A/Boperty, from Schedule A/B Ity on Schedule A/B Claims Secured by Property Jumn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedul</i> e	Value o \$ \$ \$ Your lia Amount	30,900.00 9,052.00 39,952.00 abilities you owe 25,835.00
1a. Copy lir 1b. Copy lir 1c. Copy lir 1c. Summ 2. Schedule D 2a. Copy th 3. Schedule E 3a. Copy th	ne 55, Total real estate, ne 62, Total personal proper ne 63, Total of all proper narize Your Liabilities 2: Creditors Who Have 0 the total you listed in Columbia.	from Schedule A/Boperty, from Schedule A/B ty on Schedule A/B Claims Secured by Property Jumn A, Amount of claim, at E Unsecured Claims (Officia t 1 (priority unsecured clain	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedul</i> e	Value o	30,900.00 9,052.00 39,952.00 abilities you owe 25,835.00 30,664.12
1a. Copy lir 1b. Copy lir 1c. Copy lir 1c. Summ 2. Schedule D 2a. Copy th 3. Schedule E 3a. Copy th	ne 55, Total real estate, ne 62, Total personal proper ne 63, Total of all proper narize Your Liabilities 2: Creditors Who Have 0 the total you listed in Columbia.	from Schedule A/Boperty, from Schedule A/B ty on Schedule A/B Claims Secured by Property Jumn A, Amount of claim, at E Unsecured Claims (Officia t 1 (priority unsecured clain	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule</i> al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	Value o	30,900.00 9,052.00 39,952.00 abilities you owe 25,835.00 30,664.12
1a. Copy lir 1b. Copy lir 1c. Copy lir 1c. Summ 2. Summ 2. Schedule D 2a. Copy th 3. Schedule E 3a. Copy th	ne 55, Total real estate, ne 62, Total personal proper ne 63, Total of all proper narize Your Liabilities 2: Creditors Who Have 0 the total you listed in Columbia.	from Schedule A/Boperty, from Schedule A/B ty on Schedule A/B Claims Secured by Property Jumn A, Amount of claim, at E Unsecured Claims (Officia t 1 (priority unsecured clain	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule</i> al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	Value o	30,900.00 9,052.00 39,952.00 abilities you owe 25,835.00 30,664.12 41,918.44
1a. Copy lir 1b. Copy lir 1c. Copy lir 1c. Summ 2. Schedule D 2a. Copy th 3. Schedule E 3a. Copy th	ne 55, Total real estate, ne 62, Total personal proper ne 63, Total of all proper narize Your Liabilities 2: Creditors Who Have 0 the total you listed in Columbia.	from Schedule A/Boperty, from Schedule A/B ty on Schedule A/B Claims Secured by Property Jumn A, Amount of claim, at E Unsecured Claims (Officia t 1 (priority unsecured clain	y (Official Form 106D) the bottom of the last page of Part 1 of Schedule al Form 106E/F) ns) from line 6e of Schedule E/F	Value o	9,052.00 39,952.00 39,952.00 abilities

Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

2,503.00

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,633.83

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	30,664.12
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	30,664.12

3 - l- 4 - u - 4	D. I.I. W. I.		nis filing			
Debtor 1	Robin Valer		Name	Last Name		
Debtor 2	r) First Name	Middle	Name	Last Name		
Spouse, if filing	,					
Inited State	es Bankruptcy Court for	the: NORTHER	N DISTI	RICT OF OHIO		
Case numbe	er <u>19-14483</u>					☐ Check if this is ar amended filing
Official	Form 106A/E	3				
Sched	lule A/B: Pi	roperty				12/15
Part 1: Desc	question. cribe Each Residence, B	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In	s, write your name and cas	e number (if known).
Do you owi	n or have any legal or eq	uitable interest in a	ny resid	ence, building, land, or similar property?		
☐ No. Go to	to Part 2.					
Yes. Wh	here is the property?					
1.1	Rexwood Avenue		What	is the property? Check all that apply Single-family home	Do not deduct secured cl	
	dress, if available, or other des	cription		Duplex or multi-unit building Condominium or cooperative	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Street add				Condominium or cooperative Manufactured or mobile home	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property. Current value of the
		44105-0000 ZIP Code	_	Condominium or cooperative	the amount of any secure Creditors Who Have Clar	ed claims on <i>Schedule D:</i> ims Secured by Property.
Street add	land OH	44105-0000		Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$30,900.00 Describe the nature of (such as fee simple, ter	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Street add	land OH	44105-0000		Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current value of the entire property? \$30,900.00 Describe the nature of the	Current value of the portion you own? \$30,900.00 your ownership interest nancy by the entireties, or
Street add	land OH State	44105-0000		Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$30,900.00 Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$30,900.00 your ownership interest nancy by the entireties, or
Clevel City	land OH State	44105-0000		Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$30,900.00 Describe the nature of (such as fee simple, ter a life estate), if known. Debtor is sole own	Current value of the portion you own? \$30,900.00 your ownership interest nancy by the entireties, o
Clevel City Cuyah	land OH State	44105-0000	Who Union	Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iter erty identification number: IS: Vells Fargo Home Mortgage, \$6,00	Current value of the entire property? \$30,900.00 Describe the nature of (such as fee simple, ter a life estate), if known. Debtor is sole own Check if this is cor (see instructions) m, such as local	current value of the portion you own? Sa0,900.00 your ownership interest nancy by the entireties, o

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property

page 1

Det	otor i R	obin valerie Cowan		Case number (if known)	19-14483	_
3. C	ars, vans,	trucks, tractors, sport utility ve	ehicles, motorcycles			
_	l No					
	Yes					
_		Honda		Do not deduct sec	cured claims or exemptions. Put	
3.1			Who has an interest in the property? Check one	the amount of any	y secured claims on Schedule D:	
	Model:	Civic	■ Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.	
	Year:	2019 nate mileage: 4,000	Debtor 2 only	Current value of entire property?		
		ormation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:	
		Financial	A releast one of the desicis and another			
	Leased	l vehicle \$500 / month	☐ Check if this is community property	<u> </u>	0.00 \$0.00)
		nths remaining on lease)	(see instructions)			
	No arre	earage				
				Do not doduct co.	cured claims or exemptions. Put	
3.2	2 Make:	Honda	Who has an interest in the property? Check one	the amount of any	y secured claims on Schedule D:	
	Model:	Civic	Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.	
	Year:	2017	Debtor 2 only	Current value of		
		nate mileage: 37,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		ormation:	At least one of the debtors and another			
		Financial		\$(0.00 \$0.00	1
		l vehicle \$291 / month (12 s remaining on lease)	☐ Check if this is community property (see instructions)		<u>ποιου</u>	_
		ner for daughter	·			
		ter makes all payments				
	No arre	eargage				
	l _{No} l Yes					
			vn for all of your entries from Part 2, including that number here		\$0.00	1
	Jages you	nave attached for 1 art 2. Write	that number nere-	/		
Pari	3. Describ	pe Your Personal and Household It	rems			
			terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
		goods and furnishings	aldread Makes and			
		Major appliances, furniture, linens	s, china, kitchenware			
	□ No					
•	Yes. De	scribe				
		Household goo	ds and furnishings. No single item has a	value in		
		excess of \$575		value III	\$3,000.00	0
						_
[including cell phones, cameras, r	leo, stereo, and digital equipment; computers, prin nedia players, games	ters, scanners; music o	collections; electronic devices	
		Tolovision(s)	/CR(s), computer(s),cell phone(s) ect No	n single		
			e in excess of \$575.	, siligie	\$850.00	0
		The state of the s				_

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Official Form 106A/B

Best Case Bankruptcy

page 2

Schedule A/B: Property

De	ebtor 1	Robin Valerie Cowan	Case number (if known) 19-14483
	-			
	Examples	les of value s: Antiques and figurines; paintings, prints, or other artwork; books, other collections, memorabilia, collectibles	pictures, or other art objects; stamp, coi	n, or baseball card collections;
	■ No □ Yes. [Describe		
a i	Fauinme	nt for sports and hobbies		
		s: Sports, photographic, exercise, and other hobby equipment; bicy musical instruments	cles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
		Describe		
	Firearms Example ■ No	s les: Pistols, rifles, shotguns, ammunition, and related equipment		
	☐ Yes. [Describe		
	Clothes Example	les: Everyday clothes, furs, leather coats, designer wear, shoes, acc	cessories	
	Yes. [Describe		
		Clothing - misc		\$100.00
			·	
	□ No	les: Everyday jewelry, costume jewelry, engagement rings, wedding	rings, heirloom jewelry, watches, gems,	gold, silver
		Jewelry - Misc \$50 Wedding band \$1,000		\$1,050.00
13.		m animals es: Dogs, cats, birds, horses		
	■ No			
	☐ Yes. [Describe		
	Any other	er personal and household items you did not already list, inclu	ding any health aids you did not list	
	☐ Yes. 0	Give specific information		
15		ne dollar value of all of your entries from Part 3, including any e rt 3. Write that number here		\$5,000.00
		cribe Your Financial Assets n or have any legal or equitable interest in any of the following	?	Current value of the
	, you out	nor nate any logar or equitable interest in any or the following		portion you own? Do not deduct secured claims or exemptions.
	□ No	es: Money you have in your wallet, in your home, in a safe deposit	oox, and on hand when you file your peti	tion
	■ Yes			
			Cash on hand	\$20.00

Official Form 106A/B Schedule A/B: Property page 3

D	ebtor 1	Robin Va	lerie Cowa	n		Case number (if known)	19-14483
17			g, savings, o		ounts; certificates of deposit; sha s with the same institution, list ea	ares in credit unions, brokerage h	nouses, and other similar
	□ No	montan	nis. Ii you na	ve manipie account	3 with the same institution, list et	1011.	
	_				Institution name:		
			17 1	Checking	Chase Bank		\$22.00
_			17.1.	Oncoking			Ψ==100
			17.2.	Savings	Best Credit Union		\$10.00
18				ely traded stocks ent accounts with br	okerage firms, money market ac	counts	
	☐ Yes.			Institution or issuer	name:		
19		ublicly trade venture	d stock and	interests in incorp	orated and unincorporated bu	isinesses, including an interes	t in an LLC, partnership, and
	☐ Yes.	Give specifi		about them ne of entity:		% of ownership:	
20	Negot	tiable instrum	<i>ent</i> s include p	ersonal checks, ca	otiable and non-negotiable ins shiers' checks, promissory notes ansfer to someone by signing or	s, and money orders.	
	☐ Yes.	Give specific		about them uer name:			
21		ment or pens ples: Interests			403(b), thrift savings accounts, o	or other pension or profit-sharing	plans
	■ Yes.	List each acc		ely. of account:	Institution name:		
			401k		Swagelok 401k	_	\$4,000.00
22	Your s		nused deposit	s you have made s	o that you may continue service public utilities (electric, gas, wat	or use from a company ter), telecommunications compan	ies, or others
	☐ Yes.				Institution name or indivi	dual:	
23	Annuit	ties (A contra	ct for a period	dic payment of mon	ey to you, either for life or for a r	number of years)	
	☐ Yes.		Issuer nam	e and description.			
24				n an account in a cand 529(b)(1).	qualified ABLE program, or un	der a qualified state tuition pro	gram.
	■ No □ Yes.		Institution r	name and description	on. Separately file the records of	any interests.11 U.S.C. § 521(c):	
25	Trusts	s, equitable o	r future inte	rests in property (other than anything listed in lin	ne 1), and rights or powers exe	rcisable for your benefit
	_	Give specifi	c information	about them			
26	_Exam				nd other intellectual property eds from royalties and licensing	agreements	
	■ No □ Yes.	Give specifi	c information	about them			

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	Robin Valerie Cow	an	Case number (if known)	19-14483
_Exa	,	er general intangibles clusive licenses, cooperative association holdin	gs, liquor licenses, professional licens	es
■ No	o es. Give specific information	a about them		
	or property owed to you?	rabout them		Current value of the
Wolley	or property owed to you?			portion you own? Do not deduct secured claims or exemptions.
		about them, including whether you already filed	d the returns and the tay years	
	s. Give specific information	about them, including whether you already met	a the returns and the tax years	
		2019 Federal and State Tax Re Portions of the Federal Ta: any, attributable to earned inco and/or additional child tax care or being claimed as 100% exc Portions of the tax refund not attributable to earned and/or child tax credits ma subject to to other exemptions which	x Refund, if ome credit redit are empt. income ay be	\$0.00
		be determined		Ψ0.00
30. Othe Exa	benefits; unpaid loa	s you bility insurance payments, disability benefits, sions you made to someone else	ck pay, vacation pay, workers' compe	nsation, Social Security
	•	s life insurance; health savings account (HSA); c	redit, homeowner's, or renter's insurar	nce
■ Ye		npany of each policy and list its value. ompany name:	Beneficiary:	Surrender or refund value:
	Te Fa B	rate Farm erm Life Insurance Policy ace value: \$10,000 eneficiaries: Children on cash surrender value	Children	\$0.00
		waglok mployee group term life insurance		\$0.00
If yo	ou are the beneficiary of a li leone has died.	s due you from someone who has died ving trust, expect proceeds from a life insurance	e policy, or are currently entitled to reco	eive property because
□Y€	es. Give specific information	n		
Official F	orm 106A/B	Schedule A/B: Property		page

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Best Case Bankruptcy

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Debto	Robin valerie Cowan		Case number (if known)	19-14483
	aims against third parties, whether or not you have filed a la xamples: Accidents, employment disputes, insurance claims, or		and for payment	
		rigino to ode		
	Yes. Describe each claim			
34. O ʻ	her contingent and unliquidated claims of every nature, incl	luding counterclaims of	of the debtor and rights to	set off claims
	Yes. Describe each claim			
35. A ı	ny financial assets you did not already list			
	No			
	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 4, includi or Part 4. Write that number here		•	\$4,052.00
Part 5	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	te in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-rela	ated property?		
I	o. Go to Part 6.			
	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	t In.	
46. D	you own or have any legal or equitable interest in any farm	n- or commercial fishin	g-related property?	
_	No. Go to Part 7.		3 · · · · · · · · · · · · · · · · · · ·	
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
-		40		
	 you have other property of any kind you did not already lis xamples: Season tickets, country club membership 	it?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Don't 0	Lint the Tatala of Foot Bout of this Form			
Part 8	List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			\$30,900.00
	Part 2: Total vehicles, line 5	\$0.00		
	Part 3: Total personal and household items, line 15	\$5,000.00		
	Part 4: Total financial assets, line 36	\$4,052.00		
	Part 5: Total business-related property, line 45	\$0.00		
	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
ნ1. I	Part 7: Total other property not listed, line 54	+\$0.00		
62. ·	otal personal property. Add lines 56 through 61	\$9,052.00	Copy personal property t	otal \$9,052.00
63.	otal of all property on Schedule A/B. Add line 55 + line 62			\$39,952.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:			
Debtor 1	Robin Valerie Co	wan			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number	19-14483				
(if known)				_	Check if this is an
				č	amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt
1. Whic	h set of exemptions are you claiming? Check one only, even if your spouse is filling with you.

■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
14209 Rexwood Avenue Cleveland, OH 44105 Cuyahoga County	\$30,900.00		\$24,900.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Liens: 1) Wells Fargo Home Mortgage, \$6,000 (Current \$510 / month) (Inc R/E & INS) Lien is not in debtor's name Line from Schedule A/B: 1.1		100% of fair market value, up to any applicable statutory limit			
Household goods and furnishings. No single item has a value in excess	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
of \$575. Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	2020100(/-)()(u)	
Television(s), VCR(s), computer(s),cell phone(s) ect No	\$850.00		\$850.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
single item has a value in excess of \$575. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Clothing - misc Line from Schedule A/B: 11.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Scriedule AVB: 11.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(d)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

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Best Case Bankruptcy

Debtor	Robin Valerie Cowan			Case number (if known)	19-14483		
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	welry - sc \$50	\$1,050.00		\$1,050.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)		
W	edding band \$1,000 e from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit			
	ush on hand e from Schedule A/B: 16.1	\$20.00		\$20.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
Lii	e nom concede / v.Z. 1611			100% of fair market value, up to any applicable statutory limit	2020:00(11)(0)		
	necking: Chase Bank	\$22.00		\$22.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
	ine ironi Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(0)		
	vings: Best Credit Union le from Schedule A/B: 17.2	\$10.00		\$10.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
LII	e Holli Goricadic A/D. 1112			100% of fair market value, up to any applicable statutory limit	2020:00(11)(0)		
	1k: Swagelok 401k e from Schedule A/B: 21.1	\$4,000.00		100%	11 U.S.C. § 522(b)(3)(C)		
	5 Holli Goreadie 7 (2). 2111			100% of fair market value, up to any applicable statutory limit			
	19 Federal and State Tax Refunds ortions of the Federal Tax Refund, if	\$0.00		100%	Ohio Rev. Code Ann. §2329.66(A)(9)(g)		
an at	•			100% of fair market value, up to any applicable statutory limit	3		
ad be Po no	ditional child tax care credit are ing claimed as 100% exempt. ortions of the tax refund at attributable to earned in the from Schedule A/B: 28.1						
	3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)						
	Yes. Did you acquire the property cover ☐ No	ed by the exemption wi	thin 1	,215 days before you filed this case'	?		
	□ Yes						

Official Form 106C

Fill in this inf	ormation to identify you	ır case:				
Debtor 1	Robin Valerie C	owan				
	First Name	Middle Name Last Name	e			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last Name	е			
United States	Bankruptcy Court for the	NORTHERN DISTRICT OF OHIO				
Case number	19-14483					
(if known)	10 14400				☐ Check	if this is an
					amen	ded filing
						•
Official Fo	rm 106D					
Schedul	e D. Creditors	Who Have Claims Secur	red h	v Propert	V	12/15
<u> </u>	e b. creditors	Who have claims secul		y i Topert	<u>y</u>	12/13
	the Additional Page, fill it	If two married people are filing together, both ar out, number the entries, and attach it to this form				
1. Do any credit	ors have claims secured by	y your property?				
☐ No. Ch	eck this box and submit t	his form to the court with your other schedule:	s. You ha	ave nothing else t	o report on this form.	
_	Il in all of the information	·				
		below.				
Part 1: Lis	t All Secured Claims			2.4	0.1	0.1.0
		more than one secured claim, list the creditor separa	rately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2 cal order according to the creditor's name.		Amount of claim Oo not deduct the	Value of collateral that supports this	Unsecured portion
	io, not the claims in alphabet	car or according to the or cancer or harmon		alue of collateral.	claim	if any
	an Honda Finance	Describe the property that secures the claim:		\$15,469.00	\$0.00	\$15,469.00
Creditor's N	lame	2019 Honda Civic 4,000 miles				
		Honda Financial				
		Leased vehicle \$500 / month (30				
		months remaining on lease)				
	ankruptcy	No arrearage As of the date you file, the claim is: Check all tha				
	168088	apply.	11			
Irving,	TX 75016	☐ Contingent				
Number, St	reet, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the	e debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 onl	у	An agreement you made (such as mortgage o	or secured			
Debtor 2 onl	V	car loan)				
Debtor 1 and		☐ Statutory lien (such as tax lien, mechanic's lier	n)			
☐ At least one	of the debtors and another	☐ Judgment lien from a lawsuit	,			
	s claim relates to a	Other (including a right to offset)				
	Opened 12/18 Last					

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

page 1 of 3

Active

Date debt was incurred 4/23/19

1078

Debtor 1 Robin Valerie Cowan		Case number (if known)	19-14483	
First Name Middle N	lame Last Name			
2.2 American Honda Finance	Describe the property that secures the claim:	\$4,366.00	\$0.00	\$4,366.00
Creditor's Name	2017 Honda Civic 37,000 miles Honda Financial Leased vehicle \$291 / month (12 months remaining on lease) Co-signer for daughter Daughter makes all payments		· · · · · · · · · · · · · · · · · · ·	. ,
Attas Baulanantas	No arreargage			
Attn: Bankruptcy Po Box 168088 Irving, TX 75016	As of the date you file, the claim is: Check all that apply.	J		
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or a	aggurad		
Debtor 1 only Debtor 2 only	car loan)	securea		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 08/17 Last				
Active	Last 4 digits of account number 1138	Q		
Date debt was incurred 5/28/19	Last 4 digits of account number 1138	<u> </u>		
2.3 Wells Fargo Home Mortgage	Describe the property that secures the claim:	\$6,000.00	\$30,900.00	\$0.00
Creditor's Name	14209 Rexwood Avenue Cleveland,			
8480 Stagecoach Cir	OH 44105 Cuyahoga County Liens: 1) Wells Fargo Home Mortgage, \$6,000 (Current \$510 / month) (Inc R/E & INS) Lien is not in debtor's name As of the date you file, the claim is: Check all that			
Frederick, MD 21701	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)	Scourcu		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the deller welve of	Paliuma A au Abia no Waite de la contraction	*05.005	00	
If this is the last page of your form, add	column A on this page. Write that number here: the dollar value totals from all pages.	\$25,835. \$25,835.		
Write that number here:		φ 2 3,033.		
	or a Debt That You Already Listed			
trying to collect from you for a debt you o	ne notified about your bankruptcy for a debt that your to someone else, list the creditor in Part 1, and tyou listed in Part 1, list the additional creditors half page.	d then list the collection ager	ncy here. Similarly, if yo	u have more

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

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Debt	or 1	Robin Valeri	ie Cowan		Case number (if known)	19-14483
		First Name	Middle Name	Last Name		
	An 21	me, Number, Stree nerican Hond 70 Point Blvd gin, IL 60123			On which line in Part 1 did you ente	
	An 21	me, Number, Stree nerican Hond 70 Point Blvd gin, IL 60123	- · · · · · · · · · · · · · · · · · · ·		On which line in Part 1 did you ente	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this informa	ation to identify your	case:						
Debtor 1	Robin Valerie Cov	wan						
	First Name	Middle Name	Last Nam	е				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	e				
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT O	F OHIO					
Case number 19	9-14483							
(if known)							Check if	this is an
							amende	d filing
Official Form	106E/E							
		lha Haya Haasayr	ad Claim	_				12/15
		ho Have Unsecur						
	of Your PRIORITY Un s have priority unsecure							
		d claims against you?						
☐ No. Go to Par	π 2.							
Yes.		Mr. Handa				. , .		
identify what type possible, list the	e of claim it is. If a claim ha claims in alphabetical orde	s. If a creditor has more than one as both priority and nonpriority an er according to the creditor's nam riticular claim, list the other credit	nounts, list that ne. If you have r	claim here a	nd show both priority a	nd nonprior	ity amounts.	As much as
(For an explanati	on of each type of claim, s	see the instructions for this form i	in the instructior	booklet.)	T . (1)	B. C. W		
					Total claim	Priority amount		Nonpriority Imount
2.1 Internal F	Revenue Service	Last 4 digits of ac	count number		\$24,815.12		\$0.00	\$24,815.12
Priority Cred				0045				
PO Box 7	7346 ohia, PA 19101-7346	When was the de	bt incurred?	2015				
	eet City State Zip Code	As of the date you	u file, the claim	is: Check a	all that apply			
Who incurred	the debt? Check one.	☐ Contingent						
Debtor 1 on	ly	☐ Unliquidated						
Debtor 2 on	ly	□ Disputed						
Debtor 1 and	d Debtor 2 only	Type of PRIORITY	Y unsecured cl	aim:				
	of the debtors and anothe	Domestic supp	ort obligations					
_	is claim is for a commur	_	ain other debts	you owe the	government			
	bject to offset?	☐ Claims for deat		•	•			
■ No		☐ Other. Specify						
_		o poon,						

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Personal income tax liability for 2015

Ohio Department of Taxation	Last 4 digits of account number		\$5,849.00	9	0.00	\$5,849.0
Priority Creditor's Name Attn: Bankruptcy Division PO Box 530	When was the debt incurred?	2015	V 0,0 10100			— •
Columbus, OH 43216-0530						
Number Street City State Zip Code	As of the date you file, the claim	s: Check all tha	t apply			
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only	☐ Unliquidated					
☐ Debtor 2 only	☐ Disputed					
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	m:				
\square At least one of the debtors and another	☐ Domestic support obligations					
\square Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the gove	ernment			
Is the claim subject to offset?	Claims for death or personal injury	ıry while you we	re intoxicated			
■ No	Other. Specify					
Yes	2015 Perso	nal Income	Tax Liabililty			
 No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each content. 	alphabetical order of the creditor v	rho holds each				
Yes. List all of your nonpriority unsecured claims in the	e alphabetical order of the creditor was laim. For each claim listed, identify wh	rho holds each at type of claim	it is. Do not list cla	ims already ind	cluded in F Continua	Part 1. If more tion Page of
Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.	e alphabetical order of the creditor valaim. For each claim listed, identify when creditors in Part 3.If you have more the	rho holds each at type of claim an three nonpri	it is. Do not list cla	ims already ind	cluded in F	Part 1. If more tion Page of
Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial	e alphabetical order of the creditor was laim. For each claim listed, identify wh	rho holds each at type of claim an three nonpri	it is. Do not list cla	ims already ind	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901	e alphabetical order of the creditor valaim. For each claim listed, identify when creditors in Part 3.If you have more the	rho holds each at type of claim lan three nonpri	it is. Do not list cla	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept	e alphabetical order of the creditor valaim. For each claim listed, identify which creditors in Part 3.If you have more the Last 4 digits of account numb	who holds each at type of claim an three nonprior 4248 Opened 3/18/19	it is. Do not list cla ority unsecured cl	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code	e alphabetical order of the creditor value. For each claim listed, identify who creditors in Part 3.If you have more the Last 4 digits of account numb	who holds each at type of claim an three nonprior 4248 Opened 3/18/19	it is. Do not list cla ority unsecured cl	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code Who incurred the debt? Check one.	e alphabetical order of the creditor valaim. For each claim listed, identify what creditors in Part 3.If you have more the creditors in Part 4.If you have more than 2.If you have more t	who holds each at type of claim an three nonprior 4248 Opened 3/18/19	it is. Do not list cla ority unsecured cl	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	e alphabetical order of the creditor valaim. For each claim listed, identify what creditors in Part 3.If you have more the creditors in Part 4. If you have more the creditors in Part 4. If you have more than 2.If you have more than 3.If you have more	who holds each at type of claim an three nonprior 4248 Opened 3/18/19	it is. Do not list cla ority unsecured cl	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	e alphabetical order of the creditor valaim. For each claim listed, identify where creditors in Part 3.If you have more the creditors in Part 4. If you have mor	who holds each at type of claim an three nonprier 4248 Opened 3/18/19 m is: Check all	it is. Do not list cla ority unsecured cl	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	e alphabetical order of the creditor valaim. For each claim listed, identify who creditors in Part 3.If you have more the creditors in Part 4 digits of account numb When was the debt incurred? As of the date you file, the claim contingent continue co	who holds each at type of claim an three nonprier 4248 Opened 3/18/19 m is: Check all	it is. Do not list cla ority unsecured cl	ims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	e alphabetical order of the creditor valaim. For each claim listed, identify what creditors in Part 3.If you have more the creditors in Part 4. If you have more the creditors in Part 4. If you have more the creditors in Part 4. If you have more the creditors in Part 4. If you have more the creditors in Part 4. If you have more than 1. If you have more tha	who holds each at type of claim an three nonpriser 4248 Opened 3/18/19 m is: Check all red claim:	it is. Do not list cla ority unsecured cl 4/11/15 Las that apply	aims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Ally Financial Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	e alphabetical order of the creditor valaim. For each claim listed, identify what creditors in Part 3.If you have more the creditors in Part 4.If you have more the creditors as the creditors of the date you file, the claim continued to the creditors of the creditors are creditors. Contingent	cho holds each at type of claim an three nonpriser 4248 Opened 3/18/19 m is: Check all red claim:	it is. Do not list claority unsecured claority under claority und	aims already ind aims fill out the	cluded in F Continua	Part 1. If more tion Page of

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	r 1 Robin Valerie Cowan		Case number (if known)	19-14483	
4.2	AT&T	Last 4 digits of account number			\$401.00
	Nonpriority Creditor's Name P.O. Box 6416	When was the debt incurred?	2018		
	Carol Stream, IL 60197	- A. Maria I.A. Maria (1914)			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only				
	_	☐ Contingent☐ Unliquidated			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	_ `			
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	ed claim:		
	☐ At least one or the debtors and another ☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce	e that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar d	ehts	
	☐ Yes	Other. Specify Utility experience.		ebis	
4.3	Capital One	Last 4 digits of account number	2328		\$2,414.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	2014		
	Po Box 30285				
	Salt Lake City, UT 84130		in Ol I IIII .		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar d	ebts	
	Yes	■ Other. Specify Revolving			
4.4	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7272		\$1,240.00
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	2014		
	Salt Lake City, UT 84130				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims			
	■ No	☐ Debts to pension or profit-shari	= :	ebts	
	Yes	■ Other. Specify Revolving	account		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Robin Valerie Cowan	Case number (if known) 19-14483	
4.5	Capital One Auto Finance	Last 4 digits of account number 1001	\$6,697.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred? 2015	
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Deficiency balance on sale of automobile	
4.6	Charter Communications	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name 530 S Main Street Akron, OH 44311	When was the debt incurred? 2018	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Cable expense	
4.7	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number 1527	\$632.00
	Po Box 6497 Sioux Falls, SD 57117	When was the debt incurred? 2016	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Revolving account	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	Robin Valerie Cowan		Case number (if known) 19-14483	
4.8	Comenity Bank/Kay Jewelers Nonpriority Creditor's Name Attn: Bankruptcy Dept	Last 4 digits of account number When was the debt incurred?	1856 2015	\$1,167.00
	Po Box 182125 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Revolving	account	
4.9	Comenity Capital/Davids Bridal Nonpriority Creditor's Name	Last 4 digits of account number	4078	\$1,247.00
	Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	2017	
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Revolving	account	
4.1	Credit One Bank / Midland Funding	Last 4 digits of account number		\$1,616.55
	Nonpriority Creditor's Name c/o Atlantic Credit & Finance PO Box 13386	When was the debt incurred?		
	Roanoke, VA 20433 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Revolving	account	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	or 1 Robin Valerie Cowan		Case number (if known)	19-14483	
4.1	Genesis Bankcard Services	Last 4 digits of account number	4139		\$438.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 4477	When was the debt incurred?	2018		
	Beaverton, OR 97076 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	· ·	·	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	■ Other. Specify Revolving	account		
4.1	Novacare	Last 4 digits of account number			Unknown
	Nonpriority Creditor's Name 680 American Avenue	When was the debt incurred?	2013		
	King of Prussia, PA 19406 Number Street City State Zip Code	As of the date you file, the claim	s. Check all that apply		
	Who incurred the debt? Check one.	no or the date you me, the olding	or oncor an trial apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar de	ahta	
	■ No □ Yes	■ Other. Specify Medical ex		edis	
		- Other. Specify			
4.1 3	Ohio Dept of Job & Family Services	Last 4 digits of account number			\$3,694.00
	Nonpriority Creditor's Name Attn: Collections Dept / Bankruptcy PO Box 182404	When was the debt incurred?			
	Columbus, OH 43218-2404				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	П 0			
	Debtor 2 only	☐ Contingent			
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	☐ Yes	■ Other. Specify Over paym			
	- -	— Other. Opening			

Schedule E/F: Creditors Who Have Unsecured Claims

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Oliphant Finacial LLC	Last 4 digits of account number	\$11,704.89
Nonpriority Creditor's Name		7,. 0.110
c/o Alpha Recovery Corp 6912 S. Quentin St Unit 10 Centennial, CO 80112	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Personal loan	
Synchrony Bank/ Old Navy	Last 4 digits of account number 9040	\$709.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred? 2015	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other Specify Revolving account	
Synchrony Bank/ Walmart	Last 4 digits of account number	\$2,996.00
Nonpriority Creditor's Name		Ψ=,000101
PO Box 530927 Atlanta, GA 30353	When was the debt incurred? 2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specify Revolving account	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	Robin Valerie Cowan		Case number (if known) 19-14483	
4.1 7	Universal Hosp. Case Medical Ctr Nonpriority Creditor's Name	Last 4 digits of account number	Multiple	\$247.00
	P.O. Box 94564	When was the debt incurred?	2018	_
	Cleveland, OH 44194-4564 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	15. Oneok ali tilat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical ex		_
4.1 8	Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$415.00
	Attn: Verizon Wireless Bankruptcy	When was the debt incurred?	2012	
	Admini 500 Technology Dr, Ste 550 Weldon Spring, MO 63304			_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Cellular ex		_
Part 3:	List Others to Be Notified About a De	aht That You Already Listed		
5. Use tl is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts the d for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that tomeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agen	cy here. Similarly, if you
Name a	and Address	On which entry in Part 1 or Part 2 did you Line 4.2 of (<i>Check one</i>):	llist the original creditor? Part 1: Creditors with Priority Unsecured Cl	aima
c/o Di 10550	iversified Consultants) Deerwood Park Blvd sonville, FL 32256		Part 2: Creditors with Nonpriority Unsecure	
Ouch	5011VIIIC, 1 E 02200	Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did you	9	
-	al One) Capital One Dr		Part 1: Creditors with Priority Unsecured Cl	
	nond, VA 23238	•	Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did you	_	
	al One		Part 1: Creditors with Priority Unsecured Cl	
	adius Global Solutins Regency Square		Part 2: Creditors with Nonpriority Unsecure	d Claims
Suite				
	sonville, FL 32225	Last 4 digits of account number		

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Robin Valerie Cowan		Case number (if known) 19-14483
Name and Address Capital One Auto Finance c/o Alltran Financial PO Box 4043 Concord, CA 94524	On which entry in Part 1 or Part 2 did Line 4.5 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Charter Communications c/o Southwest Credit System 4120 International Pkwy Suite 1100 Carrollton, TX 75007-1958	On which entry in Part 1 or Part 2 did Line <u>4.6</u> of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address Citibank/The Home Depot c/o GC Services Limited Partnership PO Box 857	On which entry in Part 1 or Part 2 did Line 4.7 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Oaks, PA 19456	Last 4 digits of account number	
Name and Address Internal Revenue Service Insolvency Group 6 1240 East Ninth Street, Room 493 Cleveland, OH 44199	On which entry in Part 1 or Part 2 did Line 2.1 of (<i>Check one</i>):	d you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Internal Revenue Service c/o United States Attorney General US Dept of Justice Tax Division PO Box 55, Ben Franklin Station Washington, DC 20044	On which entry in Part 1 or Part 2 did Line 2.1 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
		L. P. d. C. L. P. O.
Name and Address Internal Revenue Service c/o United States Attorney Carl B Stokes US Court House 801 West Superior Ave. Suite 400 Cleveland, OH 44113-1852	On which entry in Part 1 or Part 2 did Line <u>2.1</u> of (<i>Check one</i>):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
oleveland, on 44110 1002	Last 4 digits of account number	
Name and Address Novacare c/o Nationwide Recovery Services P.O. Box 8005	On which entry in Part 1 or Part 2 did Line 4.12 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Cleveland, TN 37320-8005	Last 4 digits of account number	
Name and Address Ohio Department of Taxation c/o Attorney General of Ohio Collection Enforcement / Bankruptcy 150 E. Gay Street, 21st Floor Columbus, OH 43215	On which entry in Part 1 or Part 2 did Line 2.2 of (<i>Check one</i>):	d you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, On 43213	Last 4 digits of account number	
Name and Address Ohio Department of Taxation c/o George Calloway, Esq 5080 Tuttle Crossing Blvd #340 Dublin, OH 43016	On which entry in Part 1 or Part 2 did Line 2.2 of (<i>Check one</i>):	d you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Ohio Department of Taxation	On which entry in Part 1 or Part 2 did Line 2.2 of (<i>Check one</i>):	d you list the original creditor?

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Best Case Bankruptcy

Debtor 1 Robin Valerie Cowan		Case nui	mber (if known)	19-14483			
c/o Michael E. Scolieri, Esq 5080 Tuttle Crossing Blvd #340 Dublin, OH 43016	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number						
Name and Address Ohio Dept of Job & Family Services c/o Attorney General of Ohio Collection Enforcement / Bankruptcy 150 E. Gay Street, 21st Floor Columbus, OH 43215	On which entry in Part 1 or Part 2 did y Line 4.13 of (<i>Check one</i>):	☐ Part 1: C	reditors with Prior	ity Unsecured Claims oriority Unsecured Claims	:		
	Last 4 digits of account number	mber					
Name and Address Ohio Dept of Job & Family Services* c/o CSEA 1641 Payne Avenue Cleveland, OH 44114	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims						
	Last 4 digits of account number						
Name and Address Synchrony Bank/ Walmart c/oMidland Credit Funding 2365 Northside Drive Suite 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address Synchrony Bank/ Walmart c/o EGS Financial Care PO Box 1020 Dept 806	On which entry in Part 1 or Part 2 did y Line 4.16 of (<i>Check one</i>):	☐ Part 1: C	reditors with Prior	ity Unsecured Claims priority Unsecured Claims	:		
Horsham, PA 19044	Last 4 digits of account number						
Name and Address Universal Hosp. Case Medical Ctr c/o First Federal Credit Control 24700 Chagrin Blvd Suite 205 Beachwood, OH 44122-5662	On which entry in Part 1 or Part 2 did y Line 4.17 of (<i>Check one</i>):	☐ Part 1: C	reditors with Prior	ity Unsecured Claims priority Unsecured Claims	;		
	Last 4 digits of account number						
c/o Vantage Sourcing PO Box 6786	On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one):	☐ Part 1: C	reditors with Prior	ity Unsecured Claims oriority Unsecured Claims	;		
Dothan, AL 36302	Last 4 digits of account number						
Part 4: Add the Amounts for Each Type of Union 6. Total the amounts of certain types of unsecured claim.		al reporting p		-	mounts for each		
6a. Domestic support obligation	s	6a.	Total	Claim 0.00			
Total claims from Part 1 6b. Taxes and certain other debt 6c. Claims for death or personal	s you owe the government injury while you were intoxicated secured claims. Write that amount here	6b. 6c.	\$ \$ \$	30,664.12 0.00 0.00 30,664.12			
6f. Student loans		6f.	Total	Claim			

Total claims from Part 2

Schedule E/F: Creditors Who Have Unsecured Claims

6g. Obligations arising out of a separation agreement or divorce that

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0.00

6g.

Debtor 1 Robin Valerie Cowan Case number (if known) 19-14483

you did not report as priority claims
6h. Debts to pension or profit-sharing plans, and other similar debts

- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount
- 6j. Total Nonpriority. Add lines 6f through 6i.

6h.	\$ 0.00
6i.	\$ 41,918.44
6j.	\$ 41,918.44

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 11

Fill in this information to identify your case:									
Debtor 1									
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO						
_	19-14483								
(if known)					☐ Check if this is an				
					amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Honda Financial
1731 Central St
Evanston, IL 60201

2.2 Honor Finance
1731 Central St
Evanston, IL 60201

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	information to identify you	r case:		
Debtor 1	Robin Valerie Co	owan		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF OHIO	
Case num	ber 19-14483			
(if known)	10 14400			☐ Check if this is an amended filing
Officia	l Form 106H			
	lule H: Your Cod	lobtore		40/45
Sched	iule n. Tour Coc	ientoi s		12/15
fill it out, a your name		e boxes on the left. Atta n). Answer every question	ch the Additional Page to on.	on. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write
1. 00	you have any codebiors? (II	you are illing a joint case	e, do not list either spouse a	is a codebior.
■ No				
☐ Yes	8			
	hin the last 8 years, have yo na, California, Idaho, Louisiana			? (Community property states and territories include gton, and Wisconsin.)
■ No.	Go to line 3.			
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent l	ve with you at the time?	
in line Form	2 again as a codebtor only	if that person is a guara	antor or cosigner. Make s	f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			
	City	State	ZIP Code	

							_				
Fill	in this information t	o identify your ca	ase:								
De	btor 1	Robin Valeri	e Cowan								
	btor 2 buse, if filing)										
Un	ited States Bankrup	tcy Court for the	: NORTHERN DISTRIC	T OF OHIO		_					
Ca	se number 19-	-14483					Check	if this is:			
(If k	nown)							amended	J		
_	· · · · -	4001								g postpetition ollowing date:	chapter
<u>U</u>	fficial Form	1061					MM	1 / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/15
atta	ch a separate she	et to this form.	r spouse is not filing wi On the top of any additi								
••	information.	oymon.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more attach a separate information about	page with	Employment status	■ Employed□ Not employed				☐ Emplo	•		
	employers.		Occupation	Plater							
	Include part-time, self-employed wo		Employer's name	Swagelok							
	Occupation may i or homemaker, if		Employer's address	6060 Cockran Solon, OH 4413							
			How long employed to	nere? <u>1.5 Ye</u>	ars			_			
Pa	rt 2: Give De	tails About Mor	thly Income								
	imate monthly incouse unless you are		ate you file this form. If y	you have nothing to	report for	any	line, write \$	\$0 in the s	space. Inc	clude your nor	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	embine the information	on for all e	emple	oyers for th	at persor	n on the lii	nes below. If y	you need
							For Debte	or 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	3,6	33.83	\$	N/A	
3.	Estimate and list	t monthly overt	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	3,633	3.83	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debto	r 1	Robin Valerie Cowan			Case	number (<i>if k</i>	now	n)	19-14	483			
					For	Debtor 1				Debtor filing s	2 or		
(Cop	by line 4 here	4.		\$	3,63	3.8	3	\$		N/A	_	
5.	l ist	all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	58	2	\$	74:	2 5	Λ	\$		N/A		
	5a. 5b.	Mandatory contributions for retirement plans	5k		\$ -		2.5 0.0		\$—		N/A	_	
	5c.	Voluntary contributions for retirement plans	50		\$ ⁻		0.0		\$ 		N/A	_	
	5d.	Required repayments of retirement fund loans	50		\$_		7.5	_	\$		N/A	_	
	5е.	Insurance	56		\$_	134			\$		N/A	_	
	5f.	Domestic support obligations	5f	f.	\$		0.0		\$		N/A	_	
;	5g.	Union dues	50	g.	\$		0.0	0	\$		N/A	_	
	5h.	Other deductions. Specify:	5ł	h.+	\$_		0.0	0	+ \$		N/A	_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	97	4.1	7	\$		N/A	_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,65	9.6	6	\$		N/A	<u>.</u>	
	L ist Ba.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•								
	21	monthly net income.	88		\$		0.0		\$		N/A	_	
	3b.	Interest and dividends	8k	0.	\$		0.0	0_	\$		N/A	_	
•	Bc.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C.	\$,	0.0	0	\$		N/A		
	Bd.	Unemployment compensation	80		\$-		0.0	_	\$		N/A	_	
	Вe.	Social Security	86		\$_		0.0	_	\$		N/A	_	
;	Bf.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f	f.	\$	(0.0	0	\$		N/A	_	
	Bg.	Pension or retirement income	80		\$_		0.0		\$		N/A	_	
	Вh.	Other monthly income. Specify:	_ 8h _	h.+	\$_		0.0	0	+ \$		N/A	<u> </u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.0	0	\$		N/	Α	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,659.66	+	\$		N/A	= \$		59.66
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ.		2,039.00	_	Ψ_		IN/A	- Ψ -	2,0	39.00
11.	Stat Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep			•			-	chedule 11.			0.00
,	Writ	If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies								12.	\$	2,6	59.66
13.	Do :	you expect an increase or decrease within the year after you file this form	?								Combi month		come
		No. Yes Evolain:											

Official Form 106l Schedule I: Your Income page 2

=:11	I in this information to identify your case:						
	The trib information to identify your case.						
Deb	Robin Valerie Cowan			_	eck if this is:		
Dob	btor 2				An amended filing		
	pouse, if filing)					wing postpetition chapter f the following date:	
\ - I	3,						
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT O	F OHIO	_		MM / DD / YYYY		
Cas	se number 19-14483						
(If k	known)						
0	Official Form 106J						
S	chedule J: Your Expenses					12/	15
Be info	e as complete and accurate as possible. If two married pe formation. If more space is needed, attach another sheet imber (if known). Answer every question.						
	rt 1: Describe Your Household						
1.	Is this a joint case?						
	No. Go to line 2.						
	Yes. Does Debtor 2 live in a separate household?						
	□ No						
	☐ Yes. Debtor 2 must file Official Form 106J-2, Ex	penses for Separate	Househo	old of De	btor 2.		
2.	Do you have dependents? ☐ No						
	Do not list Debtor 1 and Debtor 2. Fill out this informati each dependent	•		ship to	Dependent's age	Does dependent live with you?	
	Do not state the					□ No	
	dependents names.	Daughte	r		29	■ Yes	
	·					□ No	
						☐ Yes	
						□ No	
						_	
						□ No	
_	De como como como de chada					_ 🗆 Yes	
3.	Do your expenses include expenses of people other than yourself and your dependents?						
	rt 2: Estimate Your Ongoing Monthly Expenses						
exp	timate your expenses as of your bankruptcy filing date u penses as of a date after the bankruptcy is filed. If this is plicable date.)
	clude expenses paid for with non-cash government assis e value of such assistance and have included it on Sched						
(Of	fficial Form 106l.)				Your exp	penses	
4.	The rental or home ownership expenses for your resid payments and any rent for the ground or lot.	ence. Include first mo	ortgage	4.	\$	500.00	
	If not included in line 4:						
	4a. Real estate taxes			4a.	\$	0.00	
	4b. Property, homeowner's, or renter's insurance			4b.	\$	0.00	
	4c. Home maintenance, repair, and upkeep expenses			4c.	\$	25.00	
_	4d. Homeowner's association or condominium dues			4d.	·	0.00	
5.	Additional mortgage payments for your residence, suc	h as home equity loa	ıns	5.	\$	0.00	

Robin Valerie Cowan		Case num	ber (if known)	19-14483
ties:				
	3	6a.	\$	60.00
•				100.00
			·	105.00
	satolino, and sabio solvitos		·	0.00
	as a second		·	495.00
			*	
			·	0.00
	_		·	75.00
•	vices		·	100.00
ical and dental expenses		11.	\$	75.00
	ntenance, bus or train fare.	40	Φ.	115.00
			·	115.00
			·	0.00
ritable contributions and rel	ligious donations	14.	\$	0.00
	d from your pay or included in lines 4 or 20.			
Life insurance		15a.	\$	55.00
Health insurance		15b.	\$	0.00
Vehicle insurance		15c.	\$	298.00
Other insurance. Specify:		15d.	\$	0.00
· · · <u> </u>	cted from your pay or included in lines 4 or 20		•	
	old oli your pay or moradod in inico 4 or 20.		\$	0.00
			*	
		17a.	\$	500.00
			*	0.00
			·	0.00
			·	
			Ф	0.00
			\$	0.00
		06i). 10.	· -	0.00
	ipport others who do not live with you.	10	Ф	0.00
	et included in lines 4 or 5 of this form or on		Incomo	
				0.00
	у		· -	0.00
			·	0.00
			· .	0.00
Maintenance, repair, and up	okeep expenses			0.00
Homeowner's association o	r condominium dues	20e.	\$	0.00
er: Specify:		21.	+\$	0.00
	es			
J				2,503.00
Copy line 22 (monthly expens	ses for Debtor 2), if any, from Official Form 106	SJ-2	\$	
Add line 22a and 22b. The re	esult is your monthly expenses.		\$	2,503.00
			· —	
Copy line 12 (your combine	ed monthly income) from Schedule I.	23a.	\$	2,659.66
Copy your monthly expense	es from line 22c above.	23b.	-\$	2,503.00
				,
Subtract your monthly expe	nses from your monthly income.			450.00
		23c.	\$	156.66
The result is your monthly n				·
ou expect an increase or de	ecrease in your expenses within the year aff aying for your car loan within the year or do you exped age?			ase or decrease because of a
rou expect an increase or de xample, do you expect to finish pa	aying for your car loan within the year or do you exped			ease or decrease because of a
	Water, sewer, garbage colle Telephone, cell phone, Inte Other. Specify: d and housekeeping supplie Idcare and children's educat thing, laundry, and dry clear sonal care products and ser lical and dental expenses into include car payments. ertainment, clubs, recreation intiable contributions and re- irrance. Include insurance deducter Life insurance Health insurance Vehicle insurance. Specify: es. Do not include taxes deductify: allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Irrayments of alimony, main ucted from your pay on line er payments you make to su cify: er real property expenses not Mortgages on other propert Real estate taxes Property, homeowner's, or in Maintenance, repair, and up Homeowner's association of er: Specify: culate your monthly expense. Add lines 4 through 21. Copy line 22 (monthly expense. Add line 22a and 22b. The reculate your monthly net income. Copy line 12 (your combine)	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies Idcare and children's education costs Ithing, laundry, and dry cleaning sonal care products and services Idical and dental expenses nsportation. Include gas, maintenance, bus or train fare. Include car payments. Include car payments. Include car payments. Include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Health insurance Other insurance. Specify: Include insurance. Specify: Include insurance deducted from your pay or included in lines 4 or 20. Include insurance Other insurance Other insurance. Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Include responding in the specific in payments of alimony, maintenance, and support that you did not repouted from your pay on line 5, Schedule 1, Your Income (Official Form 1 er payments you make to support others who do not live with you. Include in lines 4 or 5 of this form or on. Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Included in lines 4 through 21.	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: da and housekeeping supplies dicare and children's education costs thing, laundry, and dry cleaning sonal care products and services Interpolation, Include gas, maintenance, bus or train fare. Intertainment, clubs, recreation, newspapers, magazines, and books Intiable contributions and religious donations Intiable contributions Int	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cither. Specify: d and housekeeping supplies Ideare and children's education costs thing, laundry, and dry cleaning sonal care products and services Ificial and dental expenses Insportation. Include gas, maintenance, bus or train fare. Include car payments. Include car payments. Include car payments. Include car payments. Intialize contributions and religious donations Iritable contributions and religious donations Iritable contributions and religious donations Iritable contributions Include insurance deducted from your pay or included in lines 4 or 20. Life insurance Include insurance If Sb. Health insurance Include insurance If Sc. Include Insurance Insu

Fill in this informatio	n to identify your	case:		
Debtor 1 R	obin Valerie Co	wan		
Fir	st Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing) Fir	st Name	Middle Name	Last Name	
United States Bankrup	tcy Court for the:	NORTHERN DISTRIC	T OF OHIO	
Case number 19-14	1483			
(if known)				☐ Check if this is an
				amended filing
Official Form 10)6Doc			
Declaration	า About a	an Individua	I Debtor's Sche	edules 12/15
If two married people	are filing togethe	r, both are equally resp	onsible for supplying correct	information.
	roperty by fraud i	n connection with a bar		king a false statement, concealing property, or les up to \$250,000, or imprisonment for up to 20
Sign Belo	ow			
Did you pay or a	gree to pay some	eone who is NOT an atte	orney to help you fill out bank	ruptcy forms?
■ No				
☐ Yes. Name	of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119)
Under penalty of that they are true		that I have read the su	mmary and schedules filed wi	th this declaration and
X /s/ Robin Va	alerie Cowan		X	
	rie Cowan		Signature of Deb	tor 0

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date _____

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Signature of Debtor 1

Date **July 11, 2019**

Best Case Bankruptcy

Fill	in this inforn	nation to identify you	r case:			
	btor 1	Robin Valerie Co				
	DIOI I	First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	NORTHERN DISTRICT C	DF OHIO		
Ca	se number 1	19-14483				
	nown)					heck if this is an mended filing
St Be a	as complete a	of Financial and accurate as possione space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for support additional pages, write you	
		n). Answer every ques	stion. Irital Status and Where You	Lived Refere		
1. 1.	-	r current marital statu		Lived before		
	☐ Married ■ Not mar					
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
Do		,	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	ill businesses, including part-		dar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,549.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

☐ Suppliers or vendors

□ Other

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for	
	Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306-0335	6/10/2019: \$500 5/10/2019: \$500	\$1,000.00	\$6,000.00	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard	
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger a control, or owner of 20% o	neral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a gener ny managing a	al partner; corporation agent, including one fo	
	■ No□ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an	
	 ☐ Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment 						
			paid	still owe	Include cred	litor's name	
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in ar					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?	
	No. Go to line 11.Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the property	
	Ally Financial Attn: Bankruptcy P.O. Box 380901 Bloomington, MN 55438	Explain what happened 2012Dodge Journey 4/20/2019 \$6,000.0 Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized or levied.					

Case number (if known) 19-14483

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Robin Valerie Cowan

11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No								
	Yes. Fill in the details.								
	Creditor Name and Address	D	escribe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	■ No □ Yes								
Pai	t 5: List Certain Gifts and Contribution	ns							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$6 per person	00	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)								
Par	t 6: List Certain Losses								
15.		uptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,				
	☐ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Pai	t 7: List Certain Payments or Transfer								
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or	ıptcy, o	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		erty to anyone you				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

Case number (if known) 19-14483

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Debtor 1 Robin Valerie Cowan

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v transferred	Description and value of any property transferred		Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer		Describe any property or payments received or debts paid in exchange		Date transfer was made
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.					
	Name of trust	Description and value of the property transferre			ed	Date Transfer was made
	List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	instrument cl		te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the	contents	Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Robin Valerie Cowan Case number (if known) 19-14483

Par	t 9: Identify Property You Hold or Control for So	omeone Else			
23.	Do you hold or control any property that someon for someone.	e else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Par	t 10: Give Details About Environmental Informat	ion			
For	the purpose of Part 10, the following definitions a	pply:			
	Environmental law means any federal, state, or lot toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground	_	•	
	Site means any location, facility, or property as d to own, operate, or utilize it, including disposal s	_	law,	whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or significant to the second sec	ental law defines as a hazardous	s wa	ste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that you	ı know about, regardless of wher	n the	y occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable	unc	ler or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any re	elease of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	rative proceeding under any envi	ironr	nental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11: Give Details About Your Business or Conne	ections to Any Business			
27.	Within 4 years before you filed for bankruptcy, di	d you own a business or have an	ny of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a tra	ade, profession, or other activity,	eith	er full-time or part-time	
	☐ A member of a limited liability company (LLC) or limited liability partnersh	ip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing executive	ve of a corporation			
	☐ An owner of at least 5% of the voting or equity securities of a corporation				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1 Robin Valerie Cowan Case number (if known) 19-14483

	■ No. None of the above applies. Go to Part 12.					
	☐ Yes. Check all that apply above and fill	in the details below for each business.				
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed			
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

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Debtor 1	Robin Valerie Cowan	Cas	se number (if known)	19-14483
Part 12:	Sign Below			
are true a with a bar	nd the answers on this <i>Statement of Financial</i> nd correct. I understand that making a false s nkruptcy case can result in fines up to \$250,00 §§ 152, 1341, 1519, and 3571.	tatement, concealing property, or ob	taining money or	
/s/ Robi	n Valerie Cowan			
	alerie Cowan e of Debtor 1	Signature of Debtor 2		
Date J	uly 11, 2019	Date		
Did you a ■ No □ Yes	ttach additional pages to <i>Your Statement of F</i>	inancial Affairs for Individuals Filing	for Bankruptcy (C	Official Form 107)?
Did you p	ay or agree to pay someone who is not an atte	orney to help you fill out bankruptcy	forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 8

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Fill in this inforr	Fill in this information to identify your case:					
Debtor 1	Debtor 1 Robin Valerie Cowan					
Debtor 2 (Spouse, if filing)						
United States E	Bankruptcy Court for the: Northern District of Ohio					
Case number (if known)	19-14483					

Check	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	11: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one o	nly.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married. Fill out both Columns A and B, lines 2-11.	ı					
10 th	ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-re 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that	month per al by 6. Fil	riod would Il in the re	be March 1 throusult. Do not includ	ugh August 31. If the ar de any income amount	mount of your monthly incom more than once. For examp	ne varied during le, if both
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	, and co	mmissi	ons (before all	\$ 3,633.83	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payme	nts from	a spouse if	\$	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	t. Include ld, your c	e regula: depende	r contributions ints, parents,	\$0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1				
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	\$	
6.	Net income from rental and other real property	Debtor					
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$ _	0.00				
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

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Best Case Bankruptcy

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

15a. Copy line 14 here=>

15b. The result is your current monthly income for the year for this part of the form.

Multiply line 15a by 12 (the number of months in a year).

page 2

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Best Case Bankruptcy

x 12

43,605.96

Debto	or 1	Rob	oin Valerie Cowan		Case number (if known)	19-14483		
16.	Calc	culate	the median family income that applies to yo	ou. Follow these steps:				
	16a.	Fill ir	n the state in which you live.	ОН				
	16b.	Fill in	n the number of people in your household.	2				
		To fi	n the median family income for your state and s nd a list of applicable median income amounts, uctions for this form. This list may also be availa	go online using the lin			\$	62,308.00
17.			he lines compare?					
	17a.		Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No					
	17b.		Line 15b is more than line 16c. On the top o 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 ab	ation of Your Dispos				
Part	3:	Ca	lculate Your Commitment Period Under 11 L	J.S.C. § 1325(b)(4)				
18.	Сор	у уоц	ur total average monthly income from line 11	•		\$_		3,633.83
19.	cont	end t	ne marital adjustment if it applies. If you are in the calculating the commitment period under 11 income, copy the amount from line 13.			ır		
	19a.	If the	e marital adjustment does not apply, fill in 0 on I	ne 19a.		- \$_		0.00
	19b.	Sub	tract line 19a from line 18.				\$	3,633.83
20.	Calc	culate	your current monthly income for the year.	Follow these steps:				
	20a.	Copy	y line 19b				\$	3,633.83
		Multi	iply by 12 (the number of months in a year).				X	12
	20b.	The	result is your current monthly income for the ye	ar for this part of the fo	rm		\$	43,605.96
	20c.	Copy	y the median family income for your state and s	ize of household from I	ine 16c		\$	62,308.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the court,	on the top of page 1 of this for	rm, check bo	x 3, <i>T</i>	he commitment
			Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise ordered	by the court, on the top of pag	e 1 of this for	m, ch	eck box 4, The
Part	4:	Sig	gn Below					
	By s	ignin	g here, under penalty of perjury I declare that th	e information on this s	atement and in any attachmen	nts is true and	d corre	ect.
X			in Valerie Cowan Valerie Cowan					
	Sig	ınatur	re of Debtor 1					
	Date		ly 11, 2019					

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

If you checked 17a, do NOT fill out or file Form 122C-2.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	45	filing fee	
\$7	75	administrative fee	
+ \$1	15	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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United States Bankruptcy Court Northern District of Ohio

In re	Robin Valerie Cowan		Case No.	19-14483	
		Debtor(s)	Chapter	13	
1.	DISCLOSURE OF COMPEN Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b			. ,	
	compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy or in connection with the ba	, or agreed to be paid nkruptcy case is as fol	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	3,000.00	
	Prior to the filing of this statement I have received			800.00	
	Balance Due		\$	2,200.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comper	nsation with any other person	n unless they are mem	bers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				
5.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspec	cts of the bankruptcy c	ease, including:	
1	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] See written contract which sets forth terms and conditions of employment. Attorney compensation statement is not a part of the contract and is provided for informational purposes only. 				
6.	By agreement with the debtor(s), the above-disclosed fee of	loes not include the following	ng service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any analyzing proceeding.	agreement or arrangement fo	or payment to me for re	epresentation of the debtor(s) in	
J	uly 11, 2019	/s/ Mark H. Kney	rel		
	Date	Mark H. Knevel Signature of Attorn KNEVEL LAW C 5250 Transporta Garfield Heights (216) 523-7800 mknevel@knevel Name of law firm	ney O. L.P.A. ition Blvd #201 s, OH 44125 Fax: (216) 523-780°	1	

United States Bankruptcy Court Northern District of Ohio

In re	Robin Valerie Cowan		Case No.	19-14483	
		Debtor(s)	Chapter	13	
	VERIFIC	CATION OF CREDITOR	R MATRIX		
The abo	ove-named Debtor hereby verifies that the	ne attached list of creditors is true and	d correct to the best	of his/her knowledge.	
Date:	July 11, 2019	/s/ Robin Valerie Cowan			
		Robin Valerie Cowan			

Signature of Debtor